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Fill in this information t	to identify your case:		
United States Bankruptc	y Court for the:		
WESTERN DISTRICT O	F PENNSYLVANIA		
Case number (if known)	24-20002-GLT	Chapter you are filing under:	
		☐ Chapter 7	
		☐ Chapter 11	
		☐ Chapter 12	
		Chapter 13	Check if this is amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/22

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's	DENIKA First name S.	First name
	license or passport).	Middle name	Middle name
	Bring your picture	JENNINGS	
	identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names and any assumed, trade names and doing business as names.		
	Do NOT list the name of any separate legal entity such as a corporation, partnership, or LLC that is not filing this petition.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-6334	

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		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Your Employer Identification Number (EIN), if any.		
		EIN	EIN
5.	Where you live		If Debtor 2 lives at a different address:
		1115 SHEFFIELD STREET Pittsburgh, PA 15233 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Allegheny County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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7.	The chapter of the Bankruptcy Code you are			rief description of each, see I go to the top of page 1 and c			C. § 342(b) for Individ	uals Filing for Bankruptcy
	choosing to file under	`	napter 7	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
			napter 11					
		□ Ch	napter 12					
		_	napter 13					
		_ 0.	iapioi 10					
8.	How you will pay the fee	_	about how yo	entire fee when I file my pe u may pay. Typically, if you a attorney is submitting your pa address.	re paying	the fee yourself,	you may pay with cash	n, cashier's check, or money
				the fee in installments. If ye in Installments (Official Form		e this option, sign	and attach the Applica	ation for Individuals to Pay
			I request that	t my fee be waived (You ma	y request	this option only if	you are filing for Chap	oter 7. By law, a judge may,
			applies to you	uired to, waive your fee, and in ir family size and you are una in to Have the Chapter 7 Filin	able to pay	the fee in install	ments). If you choose	
9.	Have you filed for bankruptcy within the last 8 years?	□ No						
	last o years:	– 16	5.	WESTERN DISTRICT				
			District	OF PA	When	6/04/22	Case number	22-21082-GLT
			District		_ _ When		Case number	
			District		_ When		Case number	
10.	Are any bankruptcy cases pending or being	■ No						
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Ye	s.					
			Debtor				Relationship to y	/ou
			District		_ When		Case number, if	known
			Debtor				Relationship to y	/ou
			District		_ When		Case number, if	known
11.	Do you rent your	■ No	Go to li	ne 12.				
	residence?	□ Ye	s. Has yo	ur landlord obtained an evicti	on judgme	ent against you?		
		. •		No. Go to line 12.	-	•		

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Par	Report About Any Bu	sinesses	You Owr	n as a Sole Propriet	or
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	and location of busi	ness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	per, Street, City, State	e & ZIP Code
	it to this petition.		Chec	k the appropriate box	to describe your business:
				Health Care Busin	ess (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as de	fined in 11 U.S.C. § 101(53A))
				Commodity Broker	(as defined in 11 U.S.C. § 101(6))
				None of the above	
13.	Are you filing under Chapter 11 of the Bankruptcy Code, and are you a <i>small business</i> <i>debtor</i> or a debtor as defined by 11 U.S. C. § 1182(1)?	proceed you are o	under Su hoosing to stateme (B).	bchapter V so that it to proceed under Sub	court must know whether you are a small business debtor or a debtor choosing to can set appropriate deadlines. If you indicate that you are a small business debtor or ochapter V, you must attach your most recent balance sheet, statement of operations, he tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. ter 11.
	For a definition of <i>small</i> business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code		1, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.			1, I am a small business debtor according to the definition in the Bankruptcy Code, and d under Subchapter V of Chapter 11.
		☐ Yes.			1, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I Subchapter V of Chapter 11.
Par	Report if You Own or	Have Any	Hazardo	ous Property or Any	Property That Needs Immediate Attention
14.	Do you own or have any	■ No.			
	property that poses or is alleged to pose a threat	☐ Yes.			
	of imminent and identifiable hazard to public health or safety?	□ res.	What is	the hazard?	
	Or do you own any property that needs immediate attention?			diate attention is why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?	Number, Street, City, State & Zip Code

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Debtor 1 DENIKA S. JENNINGS Case number (if known) 24-20002-GLT

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	tor 1 DENIKA S. JENNI	NGS			Case number (if known)	24-20002-GLT
Par	6: Answer These Quest	ions for R	eporting Purposes			
16.	What kind of debts do you have?	16a.	Are your debts primarily co			J.S.C. § 101(8) as "incurred by an
			☐ No. Go to line 16b.			
			Yes. Go to line 17.			
		16b.	Are your debts primarily be money for a business or investigation			
			☐ No. Go to line 16c.			
			☐ Yes. Go to line 17.			
		16c.	State the type of debts you o	owe that are not consumer de	ebts or business debts	
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapter	r 7. Go to line 18.		
	Do you estimate that after any exempt property is excluded and	☐ Yes.	I am filing under Chapter 7. I are paid that funds will be av			luded and administrative expenses
	administrative expenses		□ No			
	are paid that funds will be available for		☐ Yes			
	distribution to unsecured creditors?					
18.	•	1 -49		□ 1,000-5,000	□ 2	5,001-50,000
	you estimate that you owe?	☐ 50-99		5001-10,000	□ 5	0,001-100,000
		□ 100-1 □ 200-9		☐ 10,001-25,000	□ M	fore than100,000
19.	How much do you	□ \$0 - \$	50,000	□ \$1,000,001 - \$10	million 🗆 \$	500,000,001 - \$1 billion
	estimate your assets to be worth?		01 - \$100,000	\$10,000,001 - \$50		1,000,000,001 - \$10 billion
			001 - \$500,000 001 - \$1 million	□ \$50,000,001 - \$10 □ \$100,000,001 - \$5		10,000,000,001 - \$50 billion fore than \$50 billion
		ப \$500,	001 - \$1 million			Total and the common
20.	How much do you	□ \$0 - \$		□ \$1,000,001 - \$10		500,000,001 - \$1 billion
	estimate your liabilities to be?		001 - \$100,000	□ \$10,000,001 - \$50 □ \$50,000,001 - \$10		\$1,000,000,001 - \$10 billion \$10,000,000,001 - \$50 billion
		_	001 - \$500,000 001 - \$1 million	□ \$100,000,001 - \$100,000,001 - \$50,000,000	_	More than \$50 billion

Part	Sign Below					
For	you	I have ex	amined this petition, and I dec	clare under penalty of perjury	y that the information prov	vided is true and correct.
			chosen to file under Chapter 7 tates Code. I understand the r			apter 7, 11,12, or 13 of title 11, oceed under Chapter 7.
			rney represents me and I did int, I have obtained and read the			ey to help me fill out this
		I request	relief in accordance with the	chapter of title 11, United Sta	ates Code, specified in thi	s petition.
						by fraud in connection with a oth. 18 U.S.C. §§ 152, 1341, 1519,
		DENIKA	IKA S. JENNINGS A S. JENNINGS e of Debtor 1	Sign	nature of Debtor 2	
		Executed	on January 25, 2024	Exec	cuted on	
			MM / DD / YYYY		MM / DD / YY	YY

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Debtor 1 DENIKA S. JENNINGS Case number (if known) 24-20002-GLT

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Russel	l A. Burdelski, Esquire	Date	January 25, 2024
Signature of	Attorney for Debtor		MM / DD / YYYY
Russell A.	Burdelski, Esquire		
The Law C	Offices of Russell A. Burdelski, E	squire	
	RY HIGHWAY n, PA 15237		
	City, State & ZIP Code		
Contact phone	412-366-1511	Email address	Russ@BurdelskiLaw.com
72688 PA			
Bar number & S	tate		

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Fill in this info	rmation to identify your	case:		
Debtor 1	DENIKA S. JENNI	NGS		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	WESTERN DISTRICT	OF PENNSYLVANIA	
Case number	24-20002-GLT			
(if known)	24 20002 OL1			☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	t 1: Summarize Your Assets		
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	135,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	20,080.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	155,080.00
Par	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	156,642.24
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	3,183.00
	Your total liabilities	\$	159,825.24
Par	t3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,326.94
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	411.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other scl	nedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	personal	, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

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Debtor 1 DENIKA S. JENNINGS Case number (if known) 24-20002-GLT

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$______\$

One Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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ebtor 1 ebtor 2 pouse, if filing)	DENIKA S. JEI First Name		is filing	j:		
ebtor 1 ebtor 2 spouse, if filing) nited States	DENIKA S. JEI First Name					
ebtor 2 spouse, if filing) nited States	First Name	AIAIIAGO				
pouse, if filing) nited States	First Name	Middle	Name	Last Name		
nited States	First Name					
		Middle	Name	Last Name		
	Bankruptcy Court for the	e· WFSTFRN	DISTR	ICT OF PENNSYLVANIA		
ase number	Zamapio, Countrer in					
	24-20002-GLT					☐ Check if this is a
						amended filing
fficial F	Form 106A/B					
		_				
chedu	ule A/B: Pro	perty				12/15
nk it fits best	. Be as complete and acc	curate as possible	e. If two	only once. If an asset fits in more than one married people are filing together, both are	equally responsible for s	supplying correct
				married people are filing together, both are his form. On the top of any additional pages		
swer every q	uestion.					
rt 1: Descri	ibe Each Residence, Build	ding, Land, or Otl	her Real	Estate You Own or Have an Interest In		
		3,,				
Do you own	or have any legal or equit	able interest in a	ny resid	ence, building, land, or similar property?		
	_					
☐ No. Go to	Part 2.					
Yes. Whe	ere is the property?					
1			What	is the property? Check all that apply		
	HEFFIELD ST		What	is the property? Check all that apply	Do not deduct occurred	elsimo or overestione. Dut
1115 SH	HEFFIELD ST ess, if available, or other descrip	otion	•	Single-family home		claims or exemptions. Put red claims on Schedule D:
1115 SH		otion	What ■	Single-family home Duplex or multi-unit building	the amount of any secur	
1115 SH		otion	•	Single-family home	the amount of any secur	red claims on Schedule D:
1115 SH		otion	■	Single-family home Duplex or multi-unit building	the amount of any secur Creditors Who Have Cla	red claims on Schedule D: aims Secured by Property.
1115 SH	ess, if available, or other descrip	otion 15233-0000		Single-family home Duplex or multi-unit building Condominium or cooperative	the amount of any secur Creditors Who Have Cla	red claims on Schedule D: aims Secured by Property. Current value of the
1115 SH Street addre	ess, if available, or other descrip			Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	the amount of any secur Creditors Who Have Cla Current value of the entire property?	red claims on Schedule D: aims Secured by Property. Current value of the portion you own?
1115 Sh Street addre	ess, if available, or other descrip	15233-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	Current value of the entire property? \$135,000.00	current value of the portion you own? \$\frac{1}{2} \text{ for the portion you own?} \text{ \$135,000.0}
1115 SH Street addre	ess, if available, or other descrip	15233-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property	Current value of the entire property? \$135,000.00 Describe the nature of	Current value of the portion you own? \$\frac{135,000.0}{2}\$
1115 SH Street addre	ess, if available, or other descrip	15233-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare	Current value of the entire property? \$135,000.00 Describe the nature of	Current value of the portion you own? \$135,000.0
1115 SH Street addre	ess, if available, or other descrip	15233-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other	Current value of the entire property? \$135,000.00 Describe the nature of (such as fee simple, te	Current value of the portion you own? \$\frac{135,000.0}{2}\$ Tyour ownership interest enancy by the entireties, or saims Secured by Property.
1115 SH Street addre	rgh PA 1	15233-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only	Current value of the entire property? \$135,000.00 Describe the nature of (such as fee simple, te a life estate), if known.	Current value of the portion you own? \$\frac{135,000.0}{2}\$ Tyour ownership interest enancy by the entireties, or saims Secured by Property.
1115 SH Street addre	rgh PA 1	15233-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only	Current value of the entire property? \$135,000.00 Describe the nature of (such as fee simple, te a life estate), if known. Fee simple subject	Current value of the portion you own? \$\frac{1}{2}\$ your ownership interest enancy by the entireties, oct to a mortgage
Pittsbur City	rgh PA 1	15233-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only	Current value of the entire property? \$135,000.00 Describe the nature of (such as fee simple, te a life estate), if known. Fee simple subject	Current value of the portion you own? \$\frac{135,000.0}{2}\$ Tyour ownership interest enancy by the entireties, or saims Secured by Property.
Pittsbur City	rgh PA 1	15233-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Current value of the entire property? \$135,000.00 Describe the nature of (such as fee simple, te a life estate), if known. Fee simple subject Check if this is co (see instructions)	Current value of the portion you own? \$135,000.0
Pittsbur City Alleghe	rgh PA 1	15233-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Current value of the entire property? \$135,000.00 Describe the nature of (such as fee simple, te a life estate), if known. Fee simple subject Check if this is co (see instructions)	Current value of the portion you own? \$135,000.0
Pittsbur City	rgh PA 1	15233-0000	Who	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another or information you wish to add about this item	the amount of any secur Creditors Who Have Classifications Who Have Classifications with the entire property? \$135,000.00 Describe the nature of (such as fee simple, te a life estate), if known. Fee simple subject Check if this is con (see instructions) m, such as local	Current value of the portion you own? \$135,000.0

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

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1 DENIKA S. JENNINGS

Case number (if known) 24-20002-GLT

Debte	or 1 D	ENIKA S. JENNI	INGS		Case number (if known)	24-20002-GLT
3. Ca	rs. vans.	trucks, tractors, s	sport utility veh	icles, motorcycles		
	, ,	,,	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,		
	No					
•	Yes					
3.1	Make:	KIA		Who has an interest in the property? Check one		cured claims or exemptions. Put
	Model:	SORENTO		■ Debtor 1 only		secured claims on Schedule D: ve Claims Secured by Property.
	Year:	2015		Debtor 2 only		
		nate mileage:		Debtor 1 and Debtor 2 only	Current value of entire property?	the Current value of the portion you own?
		ormation:		☐ At least one of the debtors and another		Position 7 of 1 states
				☐ Check if this is community property	\$13,000).00 \$13,000.00
				(see instructions)		
3.2	Make:	JEEP		Who has an interest in the property? Check one		sured claims or exemptions. Put secured claims on Schedule D:
	Model:	COMPASS		Debtor 1 only		ve Claims Secured by Property.
	Year:	2007		Debtor 2 only	Current value of	the Current value of the
	Approxin	nate mileage:		Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other inf	ormation:		☐ At least one of the debtors and another		
	the vel	nicle is in non-ru	ınning		*	
	conditi	on		☐ Check if this is community property (see instructions)	\$900).00 \$900.00
				(666 1161146116116)		
				for all of your entries from Part 2, includin		\$13,900.00
.pa	iges you	nave attached for	Part 2. Write ti	nat number here	=>	
Part 2	Doscri	oe Your Personal and	d Hausahald Ita	me		
				erest in any of the following items?		Current value of the
<i>D</i> 0 y	ou ou c	r nave any legar e	r equitable into	rest in any or the following terms.		portion you own? Do not deduct secured claims or exemptions.
		goods and furnish Major appliances, fu scribe		china, kitchenware		
		601	ΕΛ			\$160.00
		SOF	ra 			φ100.00
		DIN	ING ROOM T	ABLE		\$1,200.00
		TV				¢500.00
		TV				\$500.00
		LAN	MPS			\$15.00
			DDET			#400.00
		CAF	RPET			\$100.00

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Debtor 1	DENIKA S. JENNINGS	Case number (if known)	24-20002-GLT
	STOVE		\$300.00
	<u> </u>		
	MICROWAVE		\$30.00
	DEEDICEDATOR		\$20.00
	REFRIGERATOR		\$20.00
	FREEZER		\$20.00
	DISHWASHER		\$75.00
	DISTRICTOR		
	WASHER		\$160.00
			400.00
	DRYER		\$80.00
	BEDROOM STE		\$500.00
	<u> </u>		
	DESK		\$30.00
	TV		\$400.00
	PICTURE		\$50.00
■ No □ Yes 8. Collect Examp	bles: Televisions and radios; audio, video, stereo, and digital equipment including cell phones, cameras, media players, games Describe tibles of value bles: Antiques and figurines; paintings, prints, or other artwork; books, pother collections, memorabilia, collectibles		
9. Equipr Examp ☐ No	nent for sports and hobbies bles: Sports, photographic, exercise, and other hobby equipment; bicyc musical instruments Describe	eles, pool tables, golf clubs, skis; canoes a	and kayaks; carpentry tools;
	GYM EQUIP		\$60.00
□ No	nples: Pistols, rifles, shotguns, ammunition, and related equipment Describe		
	HANDGUN		\$380.00

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De	ebtor 1	DENIKA S. JENNIN	GS		Case number (if known)	24-20002-GLT
	□ No		rs, leather coats, desi	gner wear, shoes, accessories		
		CLOT	HES			\$300.00
	■ No		stume jewelry, engag	ement rings, wedding rings, heirloom jew	velry, watches, gems, g	old, silver
	Examp ■ No	rm animals les: Dogs, cats, birds, ho Describe	rses			
	■ No	ner personal and house Give specific information		oot already list, including any health ai	ids you did not list	
15			•	ert 3, including any entries for pages y	ou have attached	\$4,380.00
Pa	rt 4: Des	scribe Your Financial Asse	ts			
		n or have any legal or e		any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	□ No	les: Money you have in y	•	me, in a safe deposit box, and on hand w	rhen you file your petition	on
					Cash	\$300.00
	Examp			unts; certificates of deposit; shares in cre with the same institution, list each. Institution name:	dit unions, brokerage h	nouses, and other similar
		17.1.	SAVINGS	ALLEGENT CREDIT UNION		\$1,500.00
	Ехатр	mutual funds, or public les: Bond funds, investm		kerage firms, money market accounts		
	■ No □ Yes		Institution or issuer n	ame:		
	Non-pu joint ve ■ No	-	interests in incorpo	rated and unincorporated businesses	, including an interes	t in an LLC, partnership, and
	_	Give specific information Na	about them me of entity:		% of ownership:	
20	Govern	ment and corporate bo	nds and other negot	iable and non-negotiable instruments		

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.

Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

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Debtor 1 DENIKA S. JENNINGS

Case number (if known) 24-20002-GLT

DE	eptor i DENIKA S	S. JENNINGS		Case number (if known) 22	4-20002-GL1
	■ No □ Yes. Give specific	information about them Issuer name:			
21.	Retirement or pens Examples: Interests No		(k), 403(b), thrift savings accounts, or other	r pension or profit-sharing plar	ns
	☐ Yes. List each acc	ount separately. Type of account:	Institution name:		
22.	Examples: Agreeme	used deposits you have mad	de so that you may continue service or use rent, public utilities (electric, gas, water), tel		, or others
	■ No □ Yes		Institution name or individual:		
23.	_	ct for a periodic payment of r	money to you, either for life or for a number	r of years)	
	■ No □ Yes	Issuer name and description	on.		
24.		eation IRA, in an account in 1), 529A(b), and 529(b)(1).	n a qualified ABLE program, or under a d	qualified state tuition progra	ım.
	☐ Yes	Institution name and descr	iption. Separately file the records of any int	terests.11 U.S.C. § 521(c):	
	■ No	r future interests in proper	ty (other than anything listed in line 1), a	and rights or powers exercis	sable for your benefit
	Examples: Internet of No		s, and other intellectual property occeds from royalties and licensing agreen	nents	
	Examples: Building No	es, and other general intan permits, exclusive licenses, c information about them	gibles cooperative association holdings, liquor lic	enses, professional licenses	
	- res. Give apcome	information about them			
Me	oney or property owe	ed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
	Tax refunds owed t ■ No	to you			
	_	information about them, incl	uding whether you already filed the returns	s and the tax years	
	Family support Examples: Past due ■ No □ Yes. Give specific		sal support, child support, maintenance, di	vorce settlement, property set	tlement
		wages, disability insurance p ; unpaid loans you made to s	ayments, disability benefits, sick pay, vaca someone else	ition pay, workers' compensat	tion, Social Security
	Interests in insuran				
			ealth savings account (HSA); credit, home	owner's, or renter's insurance	

Official Form 106A/B Schedule A/B: Property page 5

■ No

Case 24-20002-GLT Doc 23 Filed 01/25/24 Entered 01/25/24 11:55:13 Page 15 of 45 Document Debtor 1 **DENIKA S. JENNINGS** Case number (if known) 24-20002-GLT ☐ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No \square Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$1,800.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

■ No

☐ Yes. Give specific information.......

54. Add the dollar value of all of your entries from Part 7. Write that number here

\$0.00

Official Form 106A/B Schedule A/B: Property page 6

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Case number (if known) 24-20002-GLT Debtor 1 **DENIKA S. JENNINGS** Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$135,000.00 Part 2: Total vehicles, line 5 \$13,900.00 57. Part 3: Total personal and household items, line 15 \$4,380.00 58. Part 4: Total financial assets, line 36 \$1,800.00 Part 5: Total business-related property, line 45 59. \$0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... \$20,080.00 Copy personal property total \$20,080.00 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$155,080.00

Official Form 106A/B Schedule A/B: Property page 7

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Fill in this infor	mation to identify your	case:			
Debtor 1	DENIKA S. JENN	INGS			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT (OF PENNSYLVANIA		
Case number	24-20002-GLT				
(if known)				☐ Check if this is amended filing	

Official Form 106C

Schedule C: The Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

4/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify the Property You Claim as Exempt

	☐ You are claiming state and federal nonban	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)	
	■ You are claiming federal exemptions. 11 l	J.S.C. § 522(b)(2)			
2.	For any property you list on Schedule A/B	that you claim as exe	empt,	fill in the information below.	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from		ount of the exemption you claim eck only one box for each exemption.	Specific laws that allow exemption
		Schedule A/B	CHE	еск онну оне вох тог еаст ехетірноп.	
	1115 SHEFFIELD ST Pittsburgh, PA 15233 Allegheny County	\$135,000.00		\$6,000.00	11 U.S.C. § 522(d)(1)
	3 BED 2 BATH SINGLE FAMILY BRICK HOME Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
	2007 JEEP COMPASS	\$900.00		\$900.00	11 U.S.C. § 522(d)(2)
	the vehicle is in non-running condition Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit	
	SOFA Line from Schedule A/B: 6.1	\$160.00		\$160.00	11 U.S.C. § 522(d)(3)
	Line Iron Schedule AVB. 0.1			100% of fair market value, up to any applicable statutory limit	
	DINING ROOM TABLE Line from Schedule A/B: 6.2	\$1,200.00		\$1,200.00	11 U.S.C. § 522(d)(3)
	Line Iron Schedule AVB. 0.2			100% of fair market value, up to any applicable statutory limit	
	TV Line from Schedule A/B: 6.3	\$500.00		\$500.00	11 U.S.C. § 522(d)(3)
	LITE ITOTT SCHEUUIE AVD. U.S			100% of fair market value, up to any applicable statutory limit	

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tor 1 DENIKA S. JENNINGS		Case	e number (if known)	24-20002-GLT
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exempti	on you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for e	each exemption.	
LAMPS Line from Schedule A/B: 6.4	\$15.00	.	\$15.00	11 U.S.C. § 522(d)(3)
zino irom ositodato ivizi. et i		☐ 100% of fair mar any applicable s		
CARPET Line from Schedule A/B: 6.5	\$100.00	•	\$100.00	11 U.S.C. § 522(d)(3)
		☐ 100% of fair mar any applicable s		
STOVE Line from Schedule A/B: 6.6	\$300.00	•	\$300.00	11 U.S.C. § 522(d)(3)
		☐ 100% of fair mar any applicable s		
MICROWAVE Line from Schedule A/B: 6.7	\$30.00	•	\$30.00	11 U.S.C. § 522(d)(3)
zino irom ositodato ivizi. ett		☐ 100% of fair mar any applicable s		
REFRIGERATOR Line from Schedule A/B: 6.8	\$20.00	•	\$20.00	11 U.S.C. § 522(d)(3)
		☐ 100% of fair mar any applicable s		
FREEZER Line from Schedule A/B: 6.9	\$20.00	•	\$20.00	11 U.S.C. § 522(d)(3)
		☐ 100% of fair mar any applicable s		
DISHWASHER Line from Schedule A/B: 6.10	\$75.00	=	\$75.00	11 U.S.C. § 522(d)(3)
		☐ 100% of fair mar any applicable s		
WASHER Line from Schedule A/B: 6.11	\$160.00	•	\$160.00	11 U.S.C. § 522(d)(3)
		100% of fair mar any applicable s		
DRYER Line from Schedule A/B: 6.12	\$80.00	•	\$80.00	11 U.S.C. § 522(d)(3)
		☐ 100% of fair mar any applicable s		
BEDROOM STE Line from Schedule A/B: 6.13	\$500.00	•	\$500.00	11 U.S.C. § 522(d)(3)
		100% of fair mar any applicable s		
DESK Line from Schedule A/B: 6.14	\$30.00	•	\$30.00	11 U.S.C. § 522(d)(3)
and the second s		100% of fair mar		

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btor 1 DENIKA S. JENNINGS		Case number (if known)	24-20002-GLT
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemptio
	Copy the value from Schedule A/B	Check only one box for each exemption.	
TV Line from Schedule A/B: 6.15	\$400.00	\$400.00	11 U.S.C. § 522(d)(3)
Ellie II oli Genedale A/B. G.10		☐ 100% of fair market value, up to any applicable statutory limit	
PICTURE Line from Schedule A/B: 6.16	\$50.00	\$50.00	11 U.S.C. § 522(d)(3)
Line from Schedule A/B. 0.10		☐ 100% of fair market value, up to any applicable statutory limit	
GYM EQUIP	\$60.00	\$60.00	11 U.S.C. § 522(d)(5)
Line from Schedule A/B: 9.1		100% of fair market value, up to any applicable statutory limit	
HANDGUN	\$380.00	\$380.00	11 U.S.C. § 522(d)(5)
Line from <i>Schedule A/B</i> : 10.1		100% of fair market value, up to any applicable statutory limit	
CLOTHES Line from Schedule A/B: 11.1	\$300.00	\$300.00	11 U.S.C. § 522(d)(3)
Line Iron Scredule A/B. 11.1		100% of fair market value, up to any applicable statutory limit	
Cash Line from Schedule A/B: 16.1	\$300.00	\$300.00	11 U.S.C. § 522(d)(5)
Line nom <i>Schedule A/B</i> . 10.1		100% of fair market value, up to any applicable statutory limit	
SAVINGS: ALLEGENT CREDIT UNION	\$1,500.00	\$1,500.00	11 U.S.C. § 522(d)(5)
Line from Schedule A/B: 17.1		100% of fair market value, up to any applicable statutory limit	
Are you claiming a homestead exemption (Subject to adjustment on 4/01/25 and ever ■ No			t.)
Yes. Did you acquire the property cov☐ No	vered by the exemption wi	thin 1,215 days before you filed this case?	,
☐ Yes			

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			Document	Page 20	of 45	<u></u>	
Filli	n this information	on to identify you	r case:				
Deb	tor 1	ENIKA S. JENI	NINGS				
	Fi	rst Name	Middle Name	Last Name			
l .	tor 2 ise if, filing) Fi	rst Name	Middle Name	Last Name			
Unit	ed States Bankrup	otcy Court for the:	WESTERN DISTRICT OF PEN	INSYLVANIA			
Case (if kno		0002-GLT				_	c if this is an ded filing
Offi	cial Form 10	06D					
Sc	hedule D:	 Creditors	Who Have Claims	Secured	by Property	,	12/15
							ation If more encod
is nee			f two married people are filing togeth out, number the entries, and attach it				
1. Do	any creditors have	claims secured by	your property?				
ı	☐ No. Check this	box and submit th	nis form to the court with your other	schedules. Yo	u have nothing else to	report on this form.	
	Yes. Fill in all c	of the information b	pelow.				
Part	1: List All Se	cured Claims					
2. Li:	st all secured claim	ns. If a creditor has n	nore than one secured claim, list the cre	editor separately	Column A	Column B	Column C
for ea	ach claim. If more th	nan one creditor has	a particular claim, list the other creditors cal order according to the creditor's nam	s in Part 2. As	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1	BANK OF NEW	W YORK	Describe the property that secures	the claim:	\$0.00	\$0.00	\$0.00
	Creditor's Name		NOTICE ONLY				
	C/O KLM LAV 701 MARKET STE 5000		As of the date you file, the claim is: apply.	Check all that			
	Philadelphia,	PA 19106	☐ Contingent				
	Number, Street, City,	State & Zip Code	Unliquidated				
Who	owes the debt?	Check one.	☐ Disputed Nature of lien. Check all that apply.				
_ `	ebtor 1 only		☐ An agreement you made (such as	mortgage or secu	ıred		
_	ebtor 2 only		car loan)	3-3-			
_	ebtor 1 and Debtor	2 only	☐ Statutory lien (such as tax lien, me	chanic's lien)			
ПА	t least one of the de	btors and another	☐ Judgment lien from a lawsuit	•			

 \square Check if this claim relates to a

community debt

Date debt was incurred

☐ Other (including a right to offset)

Last 4 digits of account number

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Debtor 1 DENIKA S. JENNINGS			Case number (if known)	24-20002-GLT	
First Name Middle N	lame Last Name				
BANK OF NEW YORK MELLON	Describe the property that secures the	claim:	\$0.00	\$0.00	\$0.00
Creditor's Name	NOTICE ONLY				
240 Greenwich St, CORPORATE					
HEADQUARTERS	As of the date you file, the claim is: Che	ck all that			
ATTN: TODD GIBBONS, CEO	apply. Contingent				
New York, NY 10286					
Number, Street, City, State & Zip Code	☐ Unliquidated				
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.				
■ Debtor 1 only □ Debtor 2 only	☐ An agreement you made (such as mor car loan)	rtgage or se	ecured		
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mecha	nic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim relates to a community debt	Other (including a right to offset)				
Date debt was incurred	Last 4 digits of account number				
2.3 SANTANDER	Describe the property that secures the	claim:	\$27,642.24	\$13,000.00	\$14,642.24
Creditor's Name	2015 KIA SORENTO				
PO BOX 961245 Fort Worth, TX 76161-1245	As of the date you file, the claim is: Che apply.	eck all that			
Number, Street, City, State & Zip Code	☐ Unliquidated				
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.				
■ Debtor 1 only □ Debtor 2 only	An agreement you made (such as mor car loan)	rtgage or se	ecured		
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechan	nic's lien)			
\square At least one of the debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim relates to a community debt	Other (including a right to offset)	ECURIT	Y AGREEMENT		
Date debt was incurred 6/2022	Last 4 digits of account number	2804			

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Debtor 1	DENIKA S. JENNINGS			Case number (if known)	24-20002-GLT	
	First Name Middle N	ame Last Name	_			
') /	LECT PORTFOLIO CING	Describe the property that secures	the claim:	\$99,000.00	\$135,000.00	\$0.00
Credi	itor's Name	1115 SHEFFIELD ST Pittsbu 15233 Allegheny County 3 BED 2 BATH SINGLE FAM BRICK HOME	ILY			
_	BOX 65250 t Lake City, UT 84165	As of the date you file, the claim is: apply. Contingent	Check all that			
	ber, Street, City, State & Zip Code	☐ Unliquidated				
Who owe	s the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.				
■ Debtor □ Debtor	•	An agreement you made (such as car loan)	mortgage or se	ecured		
Debtor	1 and Debtor 2 only	Statutory lien (such as tax lien, me	chanic's lien)			
At least	t one of the debtors and another	☐ Judgment lien from a lawsuit				
	if this claim relates to a nunity debt	Other (including a right to offset)	Mortgage			
Date debt	was incurred <u>6/2001</u>	Last 4 digits of account num	ber			
2.5 UR	A OF PITTSBURGH	Describe the property that secures	the claim:	\$30,000.00	\$135,000.00	\$0.00
	A OF PITTSBURGH itor's Name	Describe the property that secures 1115 SHEFFIELD ST Pittsbu 15233 Allegheny County 3 BED 2 BATH SINGLE FAM BRICK HOME	rgh, PA	\$30,000.00	\$135,000.00	\$0.00
Credi) ROSS STREET	1115 SHEFFIELD ST Pittsbu 15233 Allegheny County 3 BED 2 BATH SINGLE FAM BRICK HOME As of the date you file, the claim is:	rgh, PA ILY	\$30,000.00	\$135,000.00	\$0.00
Credi 200 Pitt	itor's Name	1115 SHEFFIELD ST Pittsbu 15233 Allegheny County 3 BED 2 BATH SINGLE FAM BRICK HOME As of the date you file, the claim is: apply. Contingent Unliquidated	rgh, PA ILY	\$30,000.00	\$135,000.00	\$0.00
200 Pitt) ROSS STREET tsburgh, PA 15219	1115 SHEFFIELD ST Pittsbu 15233 Allegheny County 3 BED 2 BATH SINGLE FAM BRICK HOME As of the date you file, the claim is: apply. Contingent	rgh, PA ILY	\$30,000.00	\$135,000.00	\$0.00
200 Pitt Numt Who owe	D ROSS STREET tsburgh, PA 15219 ber, Street, City, State & Zip Code ts the debt? Check one. 1 only	1115 SHEFFIELD ST Pittsbut 15233 Allegheny County 3 BED 2 BATH SINGLE FAM BRICK HOME As of the date you file, the claim is: apply. Contingent Unliquidated Disputed	rgh, PA ILY Check all that		\$135,000.00	\$0.00
200 Pitt Numt Who owe: Debtor Debtor	D ROSS STREET tsburgh, PA 15219 ber, Street, City, State & Zip Code ts the debt? Check one. 1 only 2 only	1115 SHEFFIELD ST Pittsbut 15233 Allegheny County 3 BED 2 BATH SINGLE FAM BRICK HOME As of the date you file, the claim is: apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as car loan)	rgh, PA ILY Check all that		\$135,000.00	\$0.00
200 Pitt Numb Who owe: Debtor Debtor Debtor	D ROSS STREET ESburgh, PA 15219 ber, Street, City, State & Zip Code es the debt? Check one. 1 only 2 only 1 and Debtor 2 only	1115 SHEFFIELD ST Pittsbut 15233 Allegheny County 3 BED 2 BATH SINGLE FAM BRICK HOME As of the date you file, the claim is: apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as car loan) Statutory lien (such as tax lien, me	rgh, PA ILY Check all that		\$135,000.00	\$0.00
200 Pitt Numb Who owe: Debtor Debtor Debtor At least	D ROSS STREET tsburgh, PA 15219 ber, Street, City, State & Zip Code ts the debt? Check one. 1 only 2 only	1115 SHEFFIELD ST Pittsbut 15233 Allegheny County 3 BED 2 BATH SINGLE FAM BRICK HOME As of the date you file, the claim is: apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as car loan)	rgh, PA ILY Check all that	ecured	\$135,000.00	\$0.00
Z000 Pitt Numb Who owe: Debtor Debtor Debtor At least Check comm	D ROSS STREET Isburgh, PA 15219 ber, Street, City, State & Zip Code Is the debt? Check one. 1 only 2 only 1 and Debtor 2 only t one of the debtors and another if this claim relates to a	1115 SHEFFIELD ST Pittsbut 15233 Allegheny County 3 BED 2 BATH SINGLE FAM BRICK HOME As of the date you file, the claim is: apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as car loan) Statutory lien (such as tax lien, me	rgh, PA ILY Check all that mortgage or sechanic's lien) Second M	ecured	\$135,000.00	\$0.00
Z00 Pitt Numb Who owe: Debtor Debtor Debtor At least Check comm	DROSS STREET tsburgh, PA 15219 ber, Street, City, State & Zip Code ts the debt? Check one. 1 only 2 only 1 and Debtor 2 only t one of the debtors and another if this claim relates to a funity debt	1115 SHEFFIELD ST Pittsbut 15233 Allegheny County 3 BED 2 BATH SINGLE FAM BRICK HOME As of the date you file, the claim is: apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as car loan) Statutory lien (such as tax lien, me Judgment lien from a lawsuit Other (including a right to offset)	rgh, PA ILY Check all that mortgage or sechanic's lien) Second M	ecured	\$135,000.00	\$0.00
200 Pitt Numb Who owe: Debtor Debtor Debtor At least comm Date debt Add the	DROSS STREET Isburgh, PA 15219 ber, Street, City, State & Zip Code Is the debt? Check one. I only 2 only I and Debtor 2 only It one of the debtors and another If this claim relates to a Inuity debt I was incurred 2001 dollar value of your entries in Code dollar value of your entries in	1115 SHEFFIELD ST Pittsbut 15233 Allegheny County 3 BED 2 BATH SINGLE FAM BRICK HOME As of the date you file, the claim is: apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as car loan) Statutory lien (such as tax lien, me Judgment lien from a lawsuit Other (including a right to offset)	rgh, PA ILY Check all that mortgage or sechanic's lien) Second M ber	ecured		\$0.00

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Write that number here:

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		Document	Page 23	3 of 45		
Fill in th	is information to identify your cas	se:				
Debtor 1	DENIKA S. JENNING	20				
Debior 1	First Name	Middle Name	Last Name		-	
Debtor 2	2					
(Spouse if,	filing) First Name	Middle Name	Last Name			
United S	States Bankruptcy Court for the:	VESTERN DISTRICT OF PE	NNSYLVANIA		_	
Case nu	mber 24-20002-GLT					
(if known)	24-20002-GE1				пс	heck if this is an
					a	mended filing
Officia	ıl Form 106E/F					
		a Hava Hacasurad	Claima			12/15
	dule E/F: Creditors Wh			2.406	NONDRIGHTY III	
Schedule Schedule left. Attac	tory contracts or unexpired leases the G: Executory Contracts and Unexpire. D: Creditors Who Have Claims Secure the Continuation Page to this page. case number (if known).	d Leases (Official Form 106G). I d by Property. If more space is If you have no information to re	o not include needed, copy	any creditors with partia the Part you need, fill it o	ally secured claims out, number the ent	that are listed in tries in the boxes on the
	ny creditors have priority unsecured c					
_	o. Go to Part 2.	iailiis agailist you!				
☐ Y	es.					
Part 2:	List All of Your NONPRIORITY	Unsecured Claims				
3. Do a	ny creditors have nonpriority unsecure	ed claims against you?				
Пи	 You have nothing to report in this part. 	Submit this form to the court with	vour other sche	adules		
_		Cubinit and form to and court with	your outer corre	radioo.		
Y	es.					
unse	all of your nonpriority unsecured clain cured claim, list the creditor separately fo one creditor holds a particular claim, list t 2.	r each claim. For each claim listed	l, identify what t	ype of claim it is. Do not lis	st claims already inc	luded in Part 1. If more
						Total claim
	DEPARTMENT OF LABOR &					
	INDUSTRY	Last 4 digits of acc	ount number	0166		\$183.00
	Nonpriority Creditor's Name OFFICE OF UC AFFAIRS	When was the debt	incurred?	2017		
	PO BOX 67503	Wileli was the debt	. III cui i cu :	2017		
_	Harrisburg, PA 17106					
	Number Street City State Zip Code	As of the date you	file, the claim i	is: Check all that apply		
	Who incurred the debt? Check one.	_				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and anothe		RITY unsecured	ł claim:		
	Check if this claim is for a commu	<u> </u>				
	debt Is the claim subject to offset?	☐ Obligations arising report as priority clait		ration agreement or divorc	ce that you did not	
	■ No			g plans, and other similar	debts	
	■ No	•	-	MENT OF BENEFITS		
	□ 169	Other. Specify	OVENTAIL	ALIAI OI BENEFIIS	•	

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Debioi	DENIKAS	. JEMMINGS		Case III	uniber (irknown)	24-20002-GL1	
4.2	DUQUESNE Nonpriority Cred		Last 4 digits of account number	4xxx	<u>. </u>		\$1,600.00
	2515 Peble /	Ave	When was the debt incurred?	2021			
	Pittsburgh,	PA 15233 City State Zip Code	- Ac of the date you file the plains	. Ob I			
		he debt? Check one.	As of the date you file, the claim	s: Cneck	call that apply		
	■ Debtor 1 only		O continuent				
	_ ′		☐ Contingent				
	☐ Debtor 2 only		☐ Unliquidated				
	☐ Debtor 1 and	•	☐ Disputed Type of NONPRIORITY unsecure	d alaimı			
	_	of the debtors and another	Student loans	a Ciaiiii.			
	☐ Check if this debt	s claim is for a community	☐ Obligations arising out of a sepa	rotion or	recoment or diverse t	that you did not	
	Is the claim sub	ject to offset?	report as priority claims	iialioii ag	greement or divorce t	nat you did not	
	■ No		☐ Debts to pension or profit-sharin	g plans,	and other similar deb	ots	
	☐ Yes		Other. Specify LIGHT BILL	-			
4.3	PEOPLES N	ATURAL GAS	Last 4 digits of account number	4760			\$1,400.00
	Nonpriority Cred PO Box 535	323	When was the debt incurred?	2021			
		City State Zip Code	As of the date you file, the claim	i s: Check	call that apply		
	_	he debt? Check one.	_				
	Debtor 1 only		Contingent				
	Debtor 2 only		Unliquidated				
	☐ Debtor 1 and	•	Disputed				
	At least one	of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this debt	s claim is for a community	☐ Student loans			al a company	
	Is the claim sub	ject to offset?	Obligations arising out of a separeport as priority claims	iration ag	greement or divorce t	nat you did not	
	■ No		☐ Debts to pension or profit-sharin	g plans,	and other similar deb	bts	
	☐ Yes		Other. Specify GAS BILL				
Part 3:	List Others	to Be Notified About a Deb	t That You Already Listed				
is tryi have i notifie Part 4: 6. Total	ng to collect from more than one collect for any debts Add the An	n you for a debt you owe to sor reditor for any of the debts that in Parts 1 or 2, do not fill out or nounts for Each Type of Uns certain types of unsecured clain		Parts 1 tional cr	or 2, then list the c editors here. If you	ollection agency here. do not have additiona	Similarly, if you I persons to be
					Total (Claim	
	6a.	Domestic support obligations		6a.	\$	0.00	
Total claims							
from Pa	art 1 6b.	Taxes and certain other debts	you owe the government	6b.	\$	0.00	
	6c.	•	njury while you were intoxicated	6c.	\$	0.00	
	6d.	Other. Add all other priority unse	ecured claims. Write that amount here.	6d.	\$	0.00	
	6e.	Total Priority. Add lines 6a thro	ugh 6d.	6e.	\$	0.00	
					Total (Claim	
	6f.	Student loans		6f.	\$	0.00	
Total claims							
from Pa	art 2 6g.		paration agreement or divorce that	6~	Ф	0.00	
	6h.	you did not report as priority of Debts to pension or profit-sha	laims ring plans, and other similar debts	6g. 6h.	\$ \$	0.00	
	J		5,,		₩	0.00	

Other. Add all other nonpriority unsecured claims. Write that amount

3,183.00

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Debtor 1 DENIKA S. JENNINGS Case number (if known) 24-20002-GLT

here.

6j. Total Nonpriority. Add lines 6f through 6i.

6j. \$ **3,183.00**

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Fill in this infor	mation to identify your	case:	· ·	
Debtor 1	DENIKA S. JENN	INGS		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT C	OF PENNSYLVANIA	
Case number	24-20002-GLT			
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with Name, Number	whom you have the , Street, City, State and ZIP	e contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					<u></u>
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.3	Oity		Otate	Zii Code	
2.0	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_

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		Bodame	in rage 21 0	1 40	
Fill in this	information to identify your	case:			
Debtor 1	DENIKA S. JENNI	NGS			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filir	ng) First Name	Middle Name	Last Name		
	-	WESTERN DISTRICT			
United Sta	ites Bankruptcy Court for the:	WESTERN DISTRICT	JF PENNSTEVANIA		
Case numl	ber 24-20002-GLT				
(if known)					Check if this is an amended filing
					amonded ming
Officia	l Form 106H				
Sched	lule H: Your Cod	ebtors			12/15
fill it out, a your name		boxes on the left. Attack . Answer every question	n the Additional Page to 	o this page. On the top	eeded, copy the Additional Page, o of any Additional Pages, write
■ No	3				
0.1450		. Ib			
	hin the last 8 years, have you na, California, Idaho, Louisiana,				y states and territories include
■ No.	Go to line 3.				
☐ Yes	s. Did your spouse, former spou	use, or legal equivalent live	e with you at the time?		
in line Form out Co	e 2 again as a codebtor only i	f that person is a guarar Form 106E/F), or Sched	itor or cosigner. Make s	sure you have listed the 6G). Use Schedule D,	g with you. List the person shown ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fill editor to whom you owe the debt as that apply:
	•			Cricon an corroadio	o that apply.
3.1	Nome			_ Schedule D, line	
	Name			☐ Schedule E/F, li	
_				☐ Schedule G, lind	e
	Number Street City	State	ZIP Code		
2.0				□ Cohedula D. Pa	
3.2	Name			_ ☐ Schedule D, line ☐ Schedule E/F, li	
				☐ Schedule G, line	
_	Number Street				-
	City	State	ZIP Code		

Official Form 106H Schedule H: Your Codebtors Page 1 of 1

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Fill	in this information to identify your ca	ase:								
De	btor 1 DENIKA S. C	IENNINGS			_					
1	btor 2 puse, if filing)									
Un	ited States Bankruptcy Court for the	: WESTERN DISTRIC	T OF PENNSYLVANI	IA						
Ca	se number 24-20002-GLT					Check	if this is:			
(If k	nown)		-			☐ An	amende	d filing		
_									ing postpetition following date:	•
0	fficial Form 106I					MN	M / DD/ Y	YYY		
S	chedule I: Your Inc	ome								12/15
atta Pa	use. If you are separated and you ch a separate sheet to this form. It 1: Describe Employment									
1.	Fill in your employment information.		Debtor 1				Debtor 2	or non-	filing spouse	
	If you have more than one job,	Employment status	■ Employed				☐ Emplo	yed		
	attach a separate page with information about additional	Employment status	☐ Not employed	☐ Not employed			□ Not en	nployed		
	employers.	Occupation	BUS DRIVER							
	Include part-time, seasonal, or self-employed work.	Employer's name	ABC TRANSIT							
	Occupation may include student or homemaker, if it applies.	Employer's address	714 EKASTOW Sarver, PA 1609	_)					
		How long employed t	here? 10 YEA	AR						
Pa	rt 2: Give Details About Mor	nthly Income								
	imate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to r	eport for	any	line, write	\$0 in the	space. Ir	nclude your nor	n-filing
	ou or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information	on for all e	empl	oyers for th	nat persoi	n on the	lines below. If y	you need
						For Debt	tor 1		ebtor 2 or iling spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	3,0	051.00	\$	N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$	3,05	1.00	\$	N/A	

Official Form 106l Schedule I: Your Income page 1

Deb	tor 1	DENIKA S. JENNINGS	_	Case	number (if known)	24-20002	-GLT	
	Con	by line 4 hore	4.	For \$	Debtor 1	For Debt	gspouse	
		by line 4 here	4.	Φ	3,051.00	Φ	N/A	
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	454.74	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$_	0.00	\$	N/A	
	5c.	Voluntary contributions for retirement plans	5c.	\$_	0.00	\$	N/A	
	5d. 5e.	Required repayments of retirement fund loans Insurance	5d. 5e.	\$ \$	0.00	\$ \$	N/A N/A	
	5f.	Domestic support obligations	5e. 5f.	\$ 	0.00	\$	N/A	
	5g.	Union dues	5g.	\$-	80.00	\$	N/A	
	5h.	Other deductions. Specify: PA STATE TAX	5h.+		93.66	+ \$	N/A	
		PITTSBURGH C INCOME TAX		\$	91.53	\$	N/A	
		PA SUI TAX		\$	2.13	\$	N/A	
		SHALER TWP LOCAL SVC		\$	2.00	\$	N/A	
6.	Add	I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	724.06	\$	N/A	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	2,326.94	\$	N/A	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total	0-	r		¢.	N/A	
	8b.	monthly net income. Interest and dividends	8a. 8b.	\$_ \$	0.00	\$ \$	N/A N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependen regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.		\$ \$	0.00	\$\$	N/A	
	8d.	Unemployment compensation	8d.	\$	0.00	\$	N/A	
	8e.	Social Security	8e.	\$	0.00	\$	N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	8f.	\$	0.00	\$	N/A N/A	
	8g. 8h.	Other monthly income. Specify:	8g. 8h.+	· —	0.00	+ \$	N/A N/A	
	011.		_ '''		0.00	΄ Ψ		7
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N/A	
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse.	10. \$:	2,326.94 + \$_	N/	A = \$	2,326.94
11.	Inclu othe	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, you er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	r depen		•	ed in Sched	lule J. 1. +\$	0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The reset that amount on the Summary of Schedules and Statistical Summary of Certallies						2,326.94
13.	Do y	you expect an increase or decrease within the year after you file this forn No.	1?				Combine monthly	
	$\overline{}$	Yes. Explain:						

Official Form 106l Schedule I: Your Income page 2

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Fill	in this informa	ation to identify yo	our case:					
	otor 1	DENIKA S. J		3			k if this is:	
	otor 2 ouse, if filing)						An amended filing A supplement show 13 expenses as of	ving postpetition chapter the following date:
Unit	ed States Bank	ruptcy Court for the	: WESTE	RN DISTRICT OF PENNS	SYLVANIA	7	MM / DD / YYYY	
	se number 24	4-20002-GLT						
		orm 106J						
		J: Your						12/15
info	ormation. If m		eded, atta	If two married people and chanother sheet to this to the final to the final to the final three to the final three				
		ribe Your House	hold					
1.	Is this a join							
	■ No. Go to	o line 2. e s Debtor 2 live i	in a separ	ate household?				
	ΠY	es. Debtor 2 mus	st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	hold of Debt	or 2.	
2.	Do you hav	e dependents?	■ No					
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relation		Dependent's age	Does dependent live with you?
	Do not state							□ No
	dependents	names.					· -	☐ Yes ☐ No
								☐ No ☐ Yes
								□ No
								☐ Yes
								□ No
3.	Do your ex	penses include	_					☐ Yes
J.	expenses o	of people other to d your depende		No Yes				
Est exp	imate your ex	a date after the l	our bankrı	y Expenses uptcy filing date unless y y is filed. If this is a supp				
the		h assistance an		government assistance it luded it on <i>Schedule I:</i> Y			Your expe	enses
4.		or home owners		ses for your residence. In	nclude first mortgage	÷ 4. \$		0.00
		ded in line 4:	J 0	•				
						10 °		0.00
		estate taxes erty, homeowner's	s. or renter	's insurance		4a. \$ 4b. \$		0.00 0.00
	•	•		pkeep expenses		4c. \$		0.00
_		eowner's associat				4d. \$		0.00
5.	Additional i	mortgage payme	ents for yo	our residence, such as ho	me equity loans	5. \$		0.00

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Debtor 1 DENIKA S. JENNINGS	Case number (if known)	24-20002-GLT
6. Utilities:		
6a. Electricity, heat, natural gas	6a. \$	100.00
6b. Water, sewer, garbage collection	6b. \$	50.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	30.00
6d. Other. Specify:	6d. \$	0.00
7. Food and housekeeping supplies	7. \$	200.00
3. Childcare and children's education costs	8. \$	0.00
2. Clothing, laundry, and dry cleaning	9. \$	11.00
10. Personal care products and services	10. \$	
•	· ———	0.00
Medical and dental expenses	11. \$	0.00
2. Transportation. Include gas, maintenance, bus or train fare.	12. \$	20.00
Do not include car payments.	·	
3. Entertainment, clubs, recreation, newspapers, magazines, and boo		0.00
4. Charitable contributions and religious donations	14. \$	0.00
5. Insurance.	00	
Do not include insurance deducted from your pay or included in lines 4 c		2.22
15a. Life insurance	15a. \$	0.00
15b. Health insurance	15b. \$	0.00
15c. Vehicle insurance	15c. \$	0.00
15d. Other insurance. Specify:	15d. \$	0.00
6. Taxes. Do not include taxes deducted from your pay or included in lines	4 or 20.	
Specify:	16. \$	0.00
7. Installment or lease payments:		
17a. Car payments for Vehicle 1	17a. \$	0.00
17b. Car payments for Vehicle 2	17b. \$	0.00
17c. Other. Specify:	17c. \$	0.00
17d. Other. Specify:	17d. \$	0.00
B. Your payments of alimony, maintenance, and support that you did	·	0.00
deducted from your pay on line 5, Schedule I, Your Income (Official		0.00
9. Other payments you make to support others who do not live with your		0.00
Specify:	του. 19.	0.00
O. Other real property expenses not included in lines 4 or 5 of this form O. Other real property expenses not included in lines 4 or 5 of this form		
20a. Mortgages on other property	20a. \$	0.00
20b. Real estate taxes	20a. \$ 20b. \$	
	·	0.00
20c. Property, homeowner's, or renter's insurance	20c. \$	0.00
20d. Maintenance, repair, and upkeep expenses	20d. \$	0.00
20e. Homeowner's association or condominium dues	20e. \$	0.00
1. Other: Specify:	21. +\$	0.00
October 1944 Annual Market Programme and the community of		
2. Calculate your monthly expenses		44
22a. Add lines 4 through 21.	\$	411.00
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official F	form 106J-2 \$	
22c. Add line 22a and 22b. The result is your monthly expenses.	\$	411.00
3. Calculate your monthly net income.		_
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	2,326.94
23b. Copy your monthly expenses from line 22c above.	23b\$	411.00
23c. Subtract your monthly expenses from your monthly income.		1 045 04
The result is your monthly net income.	23c. \[\$	1,915.94
4. Do you expect an increase or decrease in your expenses within the For example, do you expect to finish paying for your car loan within the year or do modification to the terms of your mortgage?		se or decrease because of a
■ No.		
☐ Yes. Explain here:		

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Fill in this inform	nation to identify your	case:			
Debtor 1	DENIKA S. JENNI	NGS			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court for the:	WESTERN DISTRICT O	OF PENNSYLVANIA		
(if known)	24-20002-GLT				☐ Check if this is an amended filing
Official Form	<u> 106Dec</u>				
Declarati	ion About a	n Individual	Debtor's Sc	hedules	12/15
obtaining money years, or both. 18		connection with a bank			nent, concealing property, or , or imprisonment for up to 20
Did you pay	or agree to pay some	one who is NOT an attor	ney to help you fill out l	pankruptcy forms?	
■ No					
☐ Yes. N	lame of person				ruptcy Petition Preparer's Notice, and Signature (Official Form 119)
	ty of perjury, I declare true and correct.	that I have read the sum	mary and schedules file	ed with this declaration	n and
X /s/ DFN	IIKA S. JENNINGS		Χ		
DENIKA	A S. JENNINGS e of Debtor 1		Signature of	Debtor 2	

Date **January 25, 2024**

Date

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		nation to identify you								
Debt	or 1	DENIKA S. JENN First Name	Middle Name	Last Name						
Debt	or 2									
(Spous	se if, filing)	First Name	Middle Name	Last Name						
Unite	ed States Bar	nkruptcy Court for the:	WESTERN DISTRICT OF	PENNSYLVANIA						
Case	number 2	24-20002-GLT								
(if know	wn)				_	heck if this is an mended filing				
~ · · ·	–	407								
	icial Fo		Affairs for Individ	duals Filing for B	ankruntev	04/22				
					equally responsible for sup additional pages, write you					
numb	er (if knowr	n). Answer every que	stion.							
Part	1: Give D	etails About Your Ma	rital Status and Where You	Lived Before						
1. \	What is you	current marital statu	ıs?							
Г	☐ Married									
i	Not mar	ried								
о г			lived anywhere other than	whore you live new?						
2. [Juring the ia	ast 3 years, have you	lived anywhere other than	where you live now?						
I	No									
Ĺ	Yes. List all of the places you lived in the last 3 years. Do not include where you live now.									
	Debtor 1:		Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there				
					ity property state or territory					
states	and territori	es include Arizona, Ca	lifornia, Idaho, Louisiana, Ne	vada, New Mexico, Puerto Ri	co, Texas, Washington and W	/isconsin.)				
ı	No									
[☐ Yes. Ma	ke sure you fill out Sch	nedule H: Your Codebtors (O	fficial Form 106H).						
Part	2 Evnlai	n the Sources of You	r Income							
ı aıt	Explai	in the obtained or rota	i ilicollic							
F	Fill in the tota	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receiv	all businesses, including part-		ndar years?				
ſ	□ No									
i	_	in the details.								
			Debtor 1		Debtor 2					
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)				
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$3,051.00	☐ Wages, commissions, bonuses, tips					
			☐ Operating a business		☐ Operating a business					

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				Debtor 1		Debtor 2		
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inco		Gross income (before deductions and exclusions)
	r last calend anuary 1 to		31, 2023)	■ Wages, commissions, bonuses, tips	\$30,940.51	☐ Wages, comr bonuses, tips	nissions,	
				☐ Operating a business		☐ Operating a b	ousiness	
	or the calend anuary 1 to			■ Wages, commissions, bonuses, tips	\$42,448.00	☐ Wages, comr bonuses, tips	nissions,	
				☐ Operating a business		☐ Operating a b	ousiness	
	and other p winnings. I List each s	oublic bene f you are fil	fit payments; ng a joint cas he gross inco	ner that income is taxable. Exa pensions; rental income; interse and you have income that your me from each source separa	rest; dividends; money collec you received together, list it c	ted from lawsuits; r only once under Del	oyalties; and btor 1.	
				Debtor 1		Debtor 2		
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inco	ome	Gross income (before deductions and exclusions)
	r last calend anuary 1 to		31, 2023)	Unemployment	\$1,835.00			
	or the calend anuary 1 to			Unemployment	\$1,835.00			
Ра 6.		Debtor 1's	or Debtor 2	Made Before You Filed for 's debts primarily consume Debtor 2 has primarily consuments of personal, family, or househo	r debts? umer debts. Consumer debts	s are defined in 11	U.S.C. § 101	I(8) as "incurred by an
		During the	,	ore you filed for bankruptcy, di		l of \$7,575* or more	e?	
		□ No.	Go to line 7	' .				
		☐ Yes * Subject	paid that cr not include	each creditor to whom you pai editor. Do not include paymer payments to an attorney for th t on 4/01/25 and every 3 year	nts for domestic support oblig his bankruptcy case.	ations, such as chi	ld support a	nd alimony. Also, do
	Yes.			or both have primarily consu ore you filed for bankruptcy, di		I of \$600 or more?		
		■ No.	Go to line 7	7 .				
		□ Yes	List below of include pay	each creditor to whom you pai ments for domestic support o this bankruptcy case.				
	Creditor's	s Name and	d Address	Dates of payme	ent Total amount	Amount you	Was this p	ayment for

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7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.								
	■ No								
	☐ Yes. List all payments to an insider.								
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment			
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos		ments or transfer a	any property on a	eccount of a de	ebt that benefited an			
	■ No □ Yes. List all payments to an insider								
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment itor's name			
Pai	t 4: Identify Legal Actions, Repossession	ns and Foreclosures							
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.								
	Case title Case number	Nature of the case	Court or agency		Status of th	e case			
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below.		erty repossessed, f	oreclosed, garni	shed, attached	I, seized, or levied?			
	Creditor Name and Address	Describe the Property		Date		Value of the			
		Explain what happened	i			property			
11.	Within 90 days before you filed for bankrul accounts or refuse to make a payment bed No Yes. Fill in the details.	ptcy, did any creditor, inc		nancial institution	n, set off any a	mounts from your			
	Creditor Name and Address	Describe the action the	creditor took	Date take	action was	Amount			
12.	 Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes 								
Pa	t 5: List Certain Gifts and Contributions								
13.	Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift.	otcy, did you give any gifts	s with a total value	of more than \$60	00 per person?	?			
	Gifts with a total value of more than \$600 per person	Describe the gifts		Date the g	s you gave jifts	Value			
	Person to Whom You Gave the Gift and Address:								

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Deb	otor 1 DENIKA S. JENNINGS		Ca	ise number (i	f known) 24-20002-0	GLT			
14.	Within 2 years before you filed for bankrup	tcy.	did you give any gifts or contributions	with a total	value of more than	\$600 to any charity?			
	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No								
	\square Yes. Fill in the details for each gift or con	tribut	ion.						
	Gifts or contributions to charities that tot	al	Describe what you contributed		Dates you	Value			
	more than \$600				contributed				
	Charity's Name Address (Number, Street, City, State and ZIP Code)								
Par	t 6: List Certain Losses								
15.	Within 1 year before you filed for bankruptor gambling?	cy or	since you filed for bankruptcy, did yo	u lose anytł	ning because of thef	t, fire, other disaster			
	or gambling:								
	■ No								
	☐ Yes. Fill in the details.								
		escr	be any insurance coverage for the los	iS	Date of your	Value of property			
			e the amount that insurance has paid. Lis		loss	lost			
Par				operty.					
rai	t 7: List Certain Payments or Transfers								
16.	Within 1 year before you filed for bankrupt			ehalf pay or	transfer any prope	rty to anyone you			
	consulted about seeking bankruptcy or pre- Include any attorneys, bankruptcy petition pre-			ces required	in your hankruntcy				
	molado any attornoyo, bantaquey potition pro	paror	o, or order councoming agonesce for convi-	ooo roquirou	m your bankraptoy.				
	□ No								
	Yes. Fill in the details.								
	Person Who Was Paid		Description and value of any proper	ty	Date payment	Amount of			
	Address		transferred		or transfer was	payment			
	Email or website address Person Who Made the Payment, if Not You	u			made				
	The Law Offices of Russell A.	-	Attorney Fees PAID OF \$1000 +	THE	12/2023	\$1,000.00			
	Burdelski,		FILING FEE OF \$313. BALANCE			* *,*******			
	1020 PERRY HIGHWAY		\$4000 TO BE PAID THRU PLAN						
	Pittsburgh, PA 15237								
	Russ@BurdelskiLaw.com								
					-				
17.	Within 1 year before you filed for bankruptopromised to help you deal with your credit				transfer any prope	rty to anyone who			
	Do not include any payment or transfer that you			I					
	No								
	Yes. Fill in the details.								
	Person Who Was Paid Address		Description and value of any proper transferred	ty	Date payment or transfer was	Amount of payment			
	Address		uansierieu		made	payment			
18.	Within 2 years before you filed for bankrup	tcv.	did vou sell. trade. or otherwise transf	er anv prope	erty to anyone, other	r than property			
	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?								
	Include both outright transfers and transfers m			curity interest	or mortgage on your	property). Do not			
	include gifts and transfers that you have alrea No	uy IIS	ieu on inis sialement.						
	■ No □ Yes. Fill in the details.								
			Description and value of	Describe a	ny property or	Date transfer was			
	Person Who Received Transfer Address		Description and value of property transferred		ny property or received or debts	made			
			. ,	paid in exc					

Person's relationship to you

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Debtor 1 DENIKA S. JENNINGS

Case number (if known) 24-20002-GLT

19.	beneficiary? (These are often called asset-protect		y property to a	a seit-settie	a trust or similar device (or which you are a			
	☐ Yes. Fill in the details.								
	Name of trust	Description and v	alue of the pro	operty trans	sferred	Date Transfer was made			
Pai	tt 8: List of Certain Financial Accounts, Instru	uments, Safe Deposit	Boxes, and S	torage Unit	s				
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.								
	No Yes. Fill in the details.								
		ast 4 digits of ccount number	Type of acco	ount or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer			
21.	Do you now have, or did you have within 1 year cash, or other valuables?	ar before you filed for	bankruptcy, a	ny safe de _l	posit box or other deposi	tory for securities,			
	■ No □ Yes. Fill in the details.								
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?			
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?								
	■ No □ Yes. Fill in the details.								
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?			
Pai	rt 9: Identify Property You Hold or Control for	r Someone Else							
23.	Do you hold or control any property that some for someone.	eone else owns? Inclu	ıde any prope	rty you bor	rowed from, are storing f	or, or hold in trust			
	■ No □ Yes. Fill in the details.								
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, St Code)		Describe	the property	Value			
Pai	rt 10: Give Details About Environmental Inform	nation							
For	the purpose of Part 10, the following definitions	s apply:							
	Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.								
	Site means any location, facility, or property as to own, operate, or utilize it, including disposa	•	environmental	law, wheth	er you now own, operate	, or utilize it or used			
	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.								

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 **DENIKA S. JENNINGS**

Case number (if known) 24-20002-GLT

Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?								
■ No □ Yes. Fill in the details.								
Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice					
25. Have you notified any governmental unit of any release of hazardous material?								
■ No □ Yes. Fill in the details.								
Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice					
Have you been a party in any judicial or admi	nistrative proceeding under any envi	ronmental law? Include settlements a	and orders.					
■ No □ Yes. Fill in the details.								
Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case					
11: Give Details About Your Business or Co	onnections to Any Business							
Nithin 4 years before you filed for bankruptcy	y, did you own a business or have an	y of the following connections to any	business?					
☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time								
☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)								
☐ A partner in a partnership								
☐ An officer, director, or managing executive of a corporation								
☐ An owner of at least 5% of the voting	or equity securities of a corporation							
No. None of the above applies. Go to Pa	rt 12.							
Yes. Check all that apply above and fill in	n the details below for each business							
	Describe the nature of the business							
	Name of accountant or bookkeeper							
Nithin 2 years before you filed for bankruptcy nstitutions, creditors, or other parties.	,, did you give a financial statement t		ide all financial					
■ No								
Yes. Fill in the details below.								
Name Address (Number, Street, City, State and ZIP Code)								
	Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Have you notified any governmental unit of an No	Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Governmental unit Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Court or agency Name Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) A sole proprietor or self-employed in a trade, profession, or other activity, A member of a limited liability company (LLC) or limited liability partnershimated A partner in a partnershimated A partner in a partnershimated An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business Describe the nature of the business Name Address Name Address Name Address Date Issued Da	Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State an					

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Debtor 1 DENIKA S. JENNINGS Case number (if known) 24-20002-GLT Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ DENIKA S. JENNINGS Signature of Debtor 2 **DENIKA S. JENNINGS** Signature of Debtor 1 Date Date January 25, 2024 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

■ No

Fill in this information to identify your case:								
Debtor 1	DENIKA S. JENNINGS							
Debtor 2 (Spouse, if filing)								
United States B	United States Bankruptcy Court for the: Western District of Pennsylvania							
Case number (if known)	24-20002-GLT							

Check	Check as directed in lines 17 and 21:							
	According to the calculations required by this Statement:							
 1. Disposable income is not determined ur 11 U.S.C. § 1325(b)(3). 								
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).							
	■ 3. The commitment period is 3 years.							
	☐ 4. The commitment period is 5 years.							

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

10/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Pa	t 1: Calculate Your Average Monthly Income						
1.	What is your marital and filing status? Check one	only.					
	■ Not married. Fill out Column A, lines 2-11.						
	☐ Married. Fill out both Columns A and B, lines 2-17	1.					
1	Fill in the average monthly income that you received from a 01(10A). For example, if you are filing on September 15, the 6 ne 6 months, add the income for all 6 months and divide the to pouses own the same rental property, put the income from tha	-month period w tal by 6. Fill in th	ould be I ne result.	March 1 through Do not include	gh August 31. If the amo e any income amount m	ount of your monthly incon ore than once. For examp	ne varied during le, if both
					Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtime payroll deductions).	e, and commi	ssions	(before all	\$2,124.40	\$	
3.	Alimony and maintenance payments. Do not include Column B is filled in.	de payments fr	rom a sp	pouse if	\$0.00	\$	
4.	All amounts from any source which are regularly of you or your dependents, including child suppo from an unmarried partner, members of your househout and roommates. Do not include payments from a spoyou listed on line 3.	ort. Include regold, your depe	jular cor ndents,	ntributions parents,	\$0.00	\$	
5.	Net income from operating a business, profession, or farm	Debtor 1					
	Gross receipts (before all deductions)	*	00				
	Ordinary and necessary operating expenses	Ŧ	00				
	Net monthly income from a business, profession, or fa	arm \$ 0.	00 Co	py here -> \$	0.00	\$	
6	Net income from rental and other real property	Debtor 1					
	Gross receipts (before all deductions)	· ·	00				
	Ordinary and necessary operating expenses	· · ·	00	_			
	Net monthly income from rental or other real property	, ¢ 0.0	00 Co	pv here -> 9	0.00	\$	

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DENIKA S. JENNINGS 24-20002-GLT Debtor 1 Case number (if known) Column A Column B Debtor 1 Debtor 2 or non-filing spouse 0.00 \$ 7. Interest, dividends, and royalties 8. Unemployment compensation 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you_____ For your spouse 9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below. 0.00 0.00 Total amounts from separate pages, if any. \$ 0.00 11. Calculate your total average monthly income. Add lines 2 through 10 for 2,124.40 \$ 2.124.40 each column. Then add the total for Column A to the total for Column B. Total average monthly income Part 2: **Determine How to Measure Your Deductions from Income** 12. Copy your total average monthly income from line 11. 2,124.40 13. Calculate the marital adjustment. Check one: You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. ☐ You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. 0.00 0.00 Copy here=> 2.124.40 14. Your current monthly income. Subtract line 13 from line 12. 15. Calculate your current monthly income for the year. Follow these steps:

15a. Copy line 14 here=>

2,124.40

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Debto	or 1 _	DEN	NIKA S. JENNINGS		Case number (if known)	24-20002-	GLT	
		М	lultiply line 15a by 12 (the number of months in	n a year).			X	12
	15b	. Ti	he result is your current monthly income for the	e year for this part of the f	orm		\$	25,492.80
16	Calc	ulate	e the median family income that applies to	you. Follow these steps:				
	16a.	Fill i	n the state in which you live.	PA				
	16b.	Fill i	n the number of people in your household.	1				
	16c.	Fill ir	n the median family income for your state and	size of household.			\$	64,277.00
		instr	ind a list of applicable median income amounts uctions for this form. This list may also be ava					
17			the lines compare?					
	17a.		Line 15b is less than or equal to line 16c. 0 11 U.S.C. § 1325(b)(3). Go to Part 3. Do N					
	17b.		Line 15b is more than line 16c. On the top 1325(b)(3). Go to Part 3 and fill out Calcu your current monthly income from line 14 a	ulation of Your Disposal				
Par	3:	Ca	alculate Your Commitment Period Under 11	U.S.C. § 1325(b)(4)				
18.	Copy	y you	ur total average monthly income from line 1	1.		\$		2,124.40
19.	conte spou	end t se's	he marital adjustment if it applies. If you are hat calculating the commitment period under 1 income, copy the amount from line 13. e marital adjustment does not apply, fill in 0 on	1 U.S.C. § 1325(b)(4) allo		ır - \$		0.00
	19b.	Sub	tract line 19a from line 18.				\$	2,124.40
20.	Calc	ulate	e your current monthly income for the year.	Follow these steps:				
	20a.	Cop	y line 19b				\$	2,124.40
		Mult	iply by 12 (the number of months in a year).				X	12
	20b.	The	result is your current monthly income for the y	ear for this part of the forr	m		\$	25,492.80
	20c.	Cop	y the median family income for your state and	size of household from lir	ne 16c		\$	64,277.00
	21.	How	do the lines compare?					
			Line 20b is less than line 20c. Unless otherwiperiod is 3 years. Go to Part 4.	se ordered by the court, c	on the top of page 1 of this fo	rm, check bo	x 3, <i>Th</i>	he commitment
			Line 20b is more than or equal to line 20c. Ur commitment period is 5 years. Go to Part 4.	nless otherwise ordered by	y the court, on the top of pag	e 1 of this fo	rm, che	eck box 4, The
Part	By si //s/ DE Sign	gning DEN NIK natur	gn Below g here, under penalty of perjury I declare that the series of t	the information on this sta	tement and in any attachmer	nts is true an	d corre	ect.
	Dale		nuary 25, 2024 // DD / YYYY					
	If you	u che	ecked 17a, do NOT fill out or file Form 122C-2.					
	If you	ı che	ecked 17b, fill out Form 122C-2 and file it with	this form On line 30 of the	at form, convivour current mo	onthly income	≥ from !	line 14 ahove

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Debtor 1 DENIKA S. JENNINGS Case number (if known) 24-20002-GLT

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 07/01/2023 to 12/31/2023.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: WAGES

Income by Month:

6 Months Ago:	07/2023	\$1,507.38
5 Months Ago:	08/2023	\$695.47
4 Months Ago:	09/2023	\$2,586.27
3 Months Ago:	10/2023	\$2,749.09
2 Months Ago:	11/2023	\$2,157.18
Last Month:	12/2023	\$3,051.00
	Average per month:	\$2,124.40

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Western District of Pennsylvania

In	re DENIKA S. JENNINGS		Case No.	24-20002-GLT
		Debtor(s)	Chapter	13
	DISCLOSURE OF COMPENS	SATION OF ATTOR	NEY FOR DI	EBTOR(S)
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b) compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	of the petition in bankruptcy,	or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	5,000.00
	Prior to the filing of this statement I have received		\$	1,000.00
	Balance Due		_	4,000.00
2.	\$313.00 of the filing fee has been paid.			
3.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
4.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
5.	■ I have not agreed to share the above-disclosed compen	sation with any other person u	inless they are mem	bers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name			
6.	In return for the above-disclosed fee, I have agreed to rend	ler legal service for all aspects	of the bankruptcy	case, including:
	a. Analysis of the debtor's financial situation, and renderingb. Preparation and filing of any petition, schedules, statementc. Representation of the debtor at the meeting of creditorsd. [Other provisions as needed]	nent of affairs and plan which	may be required;	
7.	By agreement with the debtor(s), the above-disclosed fee defended Representation of the debtors in any disclosed responses to Trustee's certificates of defanconferences, status conferences, contests other actions not specifically set forth in parate of \$300/hr and such fees will be subfee provision.	hargeability actions, judio oult, or any other adversa ed hearing, actions dealin paragraph 6(d) will be paid	ial lien avoidand ry proceeding, a g with claims file I through the Ch	mended plans, conciliation ed after the bar date and any apter 13 Plan and charged at
		CERTIFICATION		
this	I certify that the foregoing is a complete statement of any as bankruptcy proceeding.	agreement or arrangement for	payment to me for i	representation of the debtor(s) in
	January 25, 2024	/s/ Russell A. Burd	delski. Esquire	
	Date	Russell A. Burdels	ski, Esquire	
		Signature of Attorney	f Dungall A. D	dalaki Famuina
		The Law Offices of 1020 PERRY HIGH		aeiski, Esquire
		Pittsburgh, PA 15		
		412-366-1511 Fax		
		Russ@BurdelskiL	aw.com	
		Name of law firm		